



Natick Recreation and Parks Department

"Create Community through People, Parks and Programs"

2015 - 2016 Winter Basketball Boys and Girls • Grades 4 - 8

WALK-IN REGISTRATION will be held at the Cole Center • 179 Boden Lane on
Tuesday, Wednesday & Thursday, October 13, 14 & 15 • 8:00 am - 5:00 pm
Wednesday & Thursday Evenings, October 14 & 15 • 7:00 pm - 8:30 pm

The Recreation & Parks Department and the Natick Basketball Association will be sponsoring the Grades 4 - 8 Basketball Program.
In order to provide a quality program for your sons and daughters, we require the registration fees listed by grade level.

DIVISION 'A' - GRADES 7 & 8

(Please Note: No Grade 7/8 Travel Players Can Register)

Teams: 10 players per team (approximately)
Practice: Once a week at Kennedy, Wilson Middle School or other site
Games: Saturdays at Kennedy or the Community Senior Center (CSC) • 117 E. Central Street - Each team will play 9 games
Boys Division: 7th & 8th Grade combined - Play Saturday mornings/afternoons
Girls Division: 7th & 8th Grade combined - Play Saturday mornings/afternoons
Begins: Week of November 30, 2015
Ends: February 13, 2016
Fee: \$101.00*

DIVISION 'B' - GRADES 4, 5 & 6

Teams: 10 players per team (approximately)
Practice: 1-hour/week (between 4 - 8 pm) any week-night at Cole Center, Brown, Lilja, Ben-Hem, Memorial or a Middle School
Games: Saturdays at Memorial, Brown, Ben-Hem or Lilja - Each team play 9 games
Boys Division: Grade 4 and Grades 5 & 6 Division - Play Saturday mornings/afternoons
Girls Division: Grade 4 and Grades 5 & 6 Division - Play Saturday mornings/afternoons
Begins: Week of November 30, 2015
Ends: February 13, 2016
Fee: \$91.00*

* FINANCIAL AID AVAILABLE

Limited financial aid is available.

For information contact the Natick Service Council located at 2 Webster Street, Natick - **PRIOR** to registering.

Parental Consent, Release from Liability and Indemnity Agreement

(Must be signed in order to participate in the Basketball Program)

On behalf of my child, a minor, I hereby consent to my child's participation in voluntary athletic, recreation programs or extra-curricular activities of the Town/City and/or Public Schools of Natick (hereinafter "the Town/City").

I/We also agree to forever RELEASE the Town/City, a municipal corporation of the Commonwealth of Massachusetts, and/or the Public Schools of Natick, the School Committee, and all their employees, officers, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic, recreation programs or extra-curricular activities of the Town/City or Public Schools ("the Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorney's fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and/or unknown personal injuries to my child or property damage resulting from my child's participation in the said Town/City and/or Public School's voluntary athletic, recreation program or extra-curricular activity which I/We may now or hereafter have as the parent(s) or guardian(s) of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise, to INDEMNIFY, REIMBURSE, DEFEND and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorney's fees, arising from personal injuries to my child or property damage resulting from my child's participation in the Town/City and/or Public Schools of Natick voluntary athletic, recreation programs or extra-curricular activities or administration of first aid.

I/We further affirm that I/We have read this Parental Consent, Release From Liability And Indemnity Agreement, and that I/We understand the contents of this Agreement. I/We understand that my child's participation in these programs is voluntary and that my child and I/We are free to choose not to participate in said programs. By signing this agreement, I/We affirm that I/We have decided to allow my child to participate in the Town/City and/or Public School's athletic, recreation programs or extra-curricular activities with full knowledge that the Releasees will not be liable to anyone for personal injuries and/or property damage my child or I/We may suffer in the voluntary Town/City and/or Public School athletic, recreation programs or extra-curricular activities.

I realize injuries can occur from participation in sports and other activities. Should my child be taken to the hospital for emergency purposes, I hereby grant permission to the attending physician to administer anesthesia, medical, x-ray and surgical procedures as may be deemed necessary or advisable.

I understand that every reasonable attempt will be made to contact me in an emergency.

Signature _____

(If under 18, parent or guardian)

Date _____

**NR&PD BASKETBALL REGISTRATION FORM**

PLEASE PRINT

Name: _____ Date of Birth _____

Grade _____ School _____ Age _____ M ☐ F ☐

Address					()
Street	Town	State & Zip	Area Code	HOME Phone (NOT Cell Phone #)	

E-mail Address

Parent/Guardian:

			()		()	
Parent (P-1)	Last	First	Area Code	WORK Phone (NOT Cell Phone #)	Area Code	CELL Phone
			()		()	
Parent (P-2)	Last	First	Area Code	WORK Phone (NOT Cell Phone #)	Area Code	CELL Phone

Please indicate an emergency calling order by NUMBERING 1 - 4 in the boxes next to the contact name.

Emergency Contact	()	()
OTHER THAN A PARENT	Relationship to Participant	Area Code Daytime Phone #
		Area Code Nighttime Phone #

Please let us know if there are any medical issues we need to be aware of (i.e., Allergies, diagnosis... *if none, write N/A*)

Parental Consent, Release from Liability and Indemnity Agreement

Please turn over to read and sign the Parental Consent, Release from Liability and Indemnity Agreement Form.

NOTE: This form MUST BE SIGNED in order to participate in the programs you are registering for.

☐ I have signed the Parental Consent on back of this Registration Form

General Information: THIS SECTION FOR GRADES 4 – 8 ONLY

IMPORTANT: Please circle any night that you **CAN NOT** practice

Monday	Tuesday	Wednesday	Thursday
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Height	inches	Weight	Playing Position
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Number of years experience in basketball Shirt Size

PARENTS: If you would be interested in **coaching** or **assisting** in the program please check box

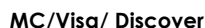
Optional donation for financial aid for the disabled and financially needy of \$1 \$

Make Checks Payable to: **TOWN OF NATICK**

Total Cost \$ _____

Method of Payment:	Cash
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☐ Check # _____
 (**\$25 will be charged for returned checks**)

☐ Credit Card

Expiration Date / CVC Code #
(Far right 3-Digit #'s from back of card)

SIGNATURE _____ DATE ____/____/____